

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



News Flash – All home health agencies (HHAs) must be participating in Home Health Care CAHPS (HHCAHPS) survey requirements for patients served in April 2012 and after, to be eligible for the full market basket payment increase for calendar year (CY) 2014. For the CY 2014 annual payment update, your agency needs to start HHCAHPS in May 2012, by providing a sample file of HHCAHPS-eligible patients who received services in your agency in April 2012. HHAs that fail to do so will have their CY 2014 payments reduced by 2 percent. CMS urges you to go to <https://homehealthcahps.org> to learn how to register for the HHCAHPS survey, and how to contract with an approved HHCAHPS survey vendor. HHAs may additionally email hhcahps@rti.org, or telephone 866-354-0985 for further assistance with HHCAHPS. **HHAs can avoid payment reductions by participating in HHCAHPS Now!**

MLN Matters® Number: SE1218

Related Change Request (CR) #: NA

Related CR Release Date: NA

Effective Date: NA

Related CR Transmittal #: NA

Implementation Date: NA

Redesigned Medicare Summary Notices

Provider Types Affected

This MLN Matters® Special Edition Article is informational in nature and is intended for all providers who provide Medicare-covered services in the Medicare Fee-For-Service (FFS) program.

Background

The Centers for Medicare & Medicaid Services (CMS) has announced the redesign of the statement that informs Medicare beneficiaries about their claims for Medicare benefits.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2011 American Medical Association.

What You Need to Know

CMS will make the redesigned statement, known as the Medicare Summary Notice (MSN), available online. Starting in 2013, CMS will mail the MSN to beneficiaries quarterly.

The MSN redesign is part of a new initiative, "Your Medicare Information: Clearer, Simpler, At Your Fingertips". This initiative aims to make Medicare information clearer, more accessible, and easier for beneficiaries and their caregivers to understand.

CMS will take additional actions this year to make information about benefits, providers, and claims more accessible and easier to understand for people who have Medicare. This MSN redesign reflects more than 18 months of research and feedback from beneficiaries to provide enhanced customer service and respond to suggestions and input.

Features of the Redesigned MSN

The redesign of the MSN includes several features that are not available in the current MSN, including:

- A clear notice on how to check the form for important facts and potential fraud;
- An easy-to-understand snapshot of:
 - The beneficiary's deductible status,
 - A list of the providers they saw, and
 - Whether Medicare approved their claims;
- Clearer language, including consumer-friendly descriptions for medical procedures;
- Definitions of all the column headers present in the form;
- Larger fonts to make it easier to read; and
- Information on preventive services available to Medicare beneficiaries.

For More Information

The redesigned MSN is available on www.mymedicare.gov, which is Medicare's secure online service for personalized information regarding Medicare benefits and services.

To see a side-by-side comparison of the former and redesigned MSNs, please visit http://www.cms.gov/apps/files/msn_changes.pdf on the CMS website.

To view the CMS press release on the MSN redesign, please visit: <http://www.CMS.gov/apps/media/press/release.asp?Counter=4298> on the CMS website.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2011 American Medical Association.